

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10-524809

FILING DATE

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL DEP.	14	◀		◀	◀	◀
TOTAL CLAIMS	10	██████████		██████████	██████████	██████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
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TOTAL IND.		▼		▼	▼	▼
TOTAL DEP.		◀		◀	◀	◀
TOTAL CLAIMS		██████████		██████████	██████████	██████████